

Application Data Sheet

Application Information

Application Type::	Regular
Subject Matter::	Utility
Suggested Classification::	
Suggested Group Art Unit::	
CD-ROM or CD-R?::	None
Number of CD disks::	
Number of Copies of CDs::	
Sequence Submission?::	None
Computer Readable Form (CRF)::	No
Number of copies of CRF::	0
Title::	APPARATUS FOR THE CHARACTERISATION OF PIGMENTED SKIN LESIONS
Attorney Docket Number::	2503-1083
Request for Early Publication?::	No
Request for Non-Publication?::	No
Suggested Drawing Figure::	
Total Drawing Sheets::	11
Small Entity?::	No
Latin Name::	
Variety Denomination Name::	
Petition Included?::	No
Petition Type::	
Licensed US Gov't Agency::	
Contract or Grant Numbers::	
Secrecy Order in Parent Appl.?::	No

Applicant Information

Applicant Authority Type:: Inventor
Primary Citizenship Country:: ITALY
Status:: Full Capacity
Given Name:: RENATO
Middle Name:: ANGELO
Family Name:: MARCHESINI
Name Suffix::
City of Residence:: MILANO
State or Province of
Residence::
Country of Residence:: ITALY
Street of Mailing VIA VENEZIAN, 1
Address::
City of Mailing Address:: MILANO
State or Province of Mailing Address::
Country of Mailing Address:: ITALY
Postal or Zip Code of Mailing Address::

Applicant Authority Type:: Inventor
Primary Citizenship Country:: ITALY
Status:: Full Capacity
Given Name:: STEFANO
Middle Name:: MARIA
Family Name:: TOMATIS
Name Suffix::
City of Residence:: MILANO
State or Province of
Residence::
Country of Residence:: ITALY
Street of Mailing VIA VENEZIAN, 1
Address::
City of Mailing Address:: MILANO

State or Province of Mailing Address::

Country of Mailing Address:: ITALY

Postal or Zip Code of Mailing Address::

Applicant Authority Type:: Inventor

Primary Citizenship Country:: ITALY

Status:: Full Capacity

Given Name:: MAURO

Middle Name::

Family Name:: CARRARA

Name Suffix::

City of Residence:: MILANO

State or Province of
Residence::

Country of Residence:: ITALY

Street of Mailing Address:: VIA VENEZIAN, 1

City of Mailing Address:: MILANO

State or Province of Mailing Address::

Country of Mailing Address:: ITALY

Postal or Zip Code of Mailing Address::

Applicant Authority Type:: Inventor

Primary Citizenship Country:: SWITZERLAND

Status:: Full Capacity

Given Name:: MARKUS

Middle Name::

Family Name:: BERNER

Name Suffix::

City of Residence:: NIEDERHASLI

State or Province of
Residence::

Country of Residence:: SWITZERLAND

Street of Mailing Address:: EIERBACHSTRASSE 6

Address::

City of Mailing Address:: NIEDERHASLI

State or Province of Mailing Address::

Country of Mailing Address:: SWITZERLAND

Postal or Zip Code of Mailing Address::

Correspondence Information

Correspondence Customer 000466

Number::

Representative Information

Representative Customer	000466
Number::	

Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::

Foreign Priority Information

Country::	Application Number::	Filing Date::	Priority Claimed::
ITALY	MI2003A000541	3/20/03	Yes

Assignment Information

Assignee Name::

Street of Mailing

Address::

City of Mailing Address::

State or Province of Mailing Address::

Country of Mailing Address::

Postal or Zip Code of Mailing Address::